

**Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1996 (1 of 3)**

All Medicare Beneficiaries

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Total Medical Services						
All beneficiaries	\$356,014	54.78	12.38	10.26	18.54	4.04
	6,571	0.74	0.50	0.43	0.47	0.35
Beneficiaries 65 years and older	299,604	56.67	11.04	9.96	19.62	2.71
	6,424	0.79	0.52	0.27	0.53	0.27
Beneficiaries 64 years and younger	56,410	44.73	19.52	11.86	12.77	11.13
	3,067	2.45	1.61	2.20	1.10	1.60
Inpatient Hospital Services						
All beneficiaries	103,861	87.70	1.21	7.38	2.38	1.34
	3,624	0.96	0.15	0.95	0.31	0.32
Beneficiaries 65 years and older	87,539	90.03	0.88	5.75	2.13	1.21
	3,405	0.63	0.06	0.44	0.24	0.34
Beneficiaries 64 years and younger	16,323	75.20	2.98	16.09	3.72	2.01
	1,454	4.62	0.85	5.05	1.53	0.70
Outpatient Hospital Services						
All beneficiaries	29,513	63.41	3.42	21.17	9.47	2.53
	951	0.69	0.23	0.68	0.46	0.31
Beneficiaries 65 years and older	22,835	62.51	2.57	23.35	9.29	2.28
	769	0.76	0.19	0.65	0.50	0.32
Beneficiaries 64 years and younger	6,677	66.48	6.34	13.69	10.08	3.41
	630	2.19	0.85	2.09	1.06	0.71
Physician/Supplier Services						
All beneficiaries	80,501	64.90	2.73	14.02	17.33	1.02
	1,393	0.66	0.42	0.47	0.54	0.16
Beneficiaries 65 years and older	69,669	66.62	1.66	13.91	16.99	0.81
	1,314	0.57	0.12	0.34	0.47	0.16
Beneficiaries 64 years and younger	10,832	53.78	9.60	14.69	19.51	2.41
	742	3.25	2.85	2.48	2.41	0.54

**Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1996 (2 of 3)**

All Medicare Beneficiaries

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Dental Services						
All beneficiaries	\$7,474	1.00	1.31	14.16	81.74	1.80
	306	0.08	0.22	0.87	1.05	0.37
Beneficiaries 65 years and older	6,883	1.03	0.71	14.24	82.41	1.62
	284	0.09	0.19	0.91	1.08	0.39
Beneficiaries 64 years and younger	590	0.58	8.29	13.22	74.04	3.88
	87	0.16	1.99	2.44	3.72	1.05
Prescription Medicines						
All beneficiaries	24,735	3.88	11.13	32.52	45.44	7.03
	416	0.16	0.57	0.80	0.58	0.43
Beneficiaries 65 years and older	20,444	4.45	7.61	33.60	47.89	6.45
	338	0.18	0.54	0.77	0.63	0.39
Beneficiaries 64 years and younger	4,291	1.16	27.89	27.38	33.78	9.79
	236	0.25	2.18	2.34	1.59	1.25
Medicare Hospice Services						
All beneficiaries	1,951	100.00	0.00	0.00	0.00	0.00
	290	0.00	0.00	0.00	0.00	0.00
Beneficiaries 65 years and older	1,822	100.00	0.00	0.00	0.00	0.00
	278	0.00	0.00	0.00	0.00	0.00
Beneficiaries 64 years and younger	129	100.00	0.00	0.00	0.00	0.00
	63	0.00	0.00	0.00	0.00	0.00
Medicare Home Health Services						
All beneficiaries	18,792	93.15	0.46	0.60	5.18	0.62
	903	2.07	0.13	0.22	2.02	0.21
Beneficiaries 65 years and older	16,858	93.20	0.43	0.38	5.62	0.37
	852	2.31	0.15	0.20	2.25	0.13
Beneficiaries 64 years and younger	1,935	92.71	0.70	2.50	1.32	2.78
	289	2.34	0.44	1.19	0.72	1.78

**Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1996 (3 of 3)**

All Medicare Beneficiaries

Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Long-Term Facility Care <sup>1</sup>						
All beneficiaries	\$89,187	14.01	41.14	2.36	31.90	10.59
	3,845	0.96	1.40	0.28	1.24	1.24
Beneficiaries 65 years and older	73,554	16.02	39.27	2.52	36.11	6.09
	3,185	1.14	1.49	0.29	1.31	0.95
Beneficiaries 64 years and younger	15,633	4.58	49.92	1.64	12.12	31.74
	1,812	1.04	4.05	0.89	2.84	4.15

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year; facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year; and expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year or part-year community residents, which were reported during a community interview or created through Medicare claims. See Appendix B for additional information.

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$88,293	87.18	1.07	7.90	2.38	1.47	\$2,410
	3,073	1.10	0.17	1.09	0.36	0.36	83.45
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	36,834	89.69	0.78	5.90	1.78	1.85	1,969
	2,990	1.29	0.11	0.74	0.35	0.77	156
75 - 84 years	28,330	90.34	0.52	5.55	2.70	0.89	2,633
	1,362	0.81	0.07	0.34	0.72	0.31	120
85 years and older	8,273	89.64	1.11	7.46	1.29	0.49	2,889
	565	1.33	0.25	1.31	0.23	0.21	185
<b>Disabled</b>							
Under 45 years	4,190	86.55	5.73	4.64	2.61	0.47	2,885
	699	3.48	3.04	1.77	0.74	0.34	465
45 - 64 years	10,665	68.46	1.64	22.70	4.34	2.86	3,749
	1,289	6.54	0.31	7.24	2.31	1.06	436
<b>Gender</b>							
Male	45,682	85.52	0.97	8.08	2.91	2.52	2,815
	3,029	1.89	0.32	1.67	0.60	0.70	183
Female	42,611	88.97	1.17	7.72	1.80	0.34	2,089
	1,580	1.16	0.09	1.13	0.44	0.18	75
<b>Living Arrangement</b>							
Alone	24,065	87.86	1.38	7.67	2.05	1.04	2,198
	1,456	1.64	0.14	1.62	0.37	0.36	123
With spouse	45,172	86.03	0.37	9.45	2.56	1.59	2,296
	2,568	1.82	0.07	1.73	0.64	0.44	122
With children	11,655	90.54	1.54	3.26	2.31	2.34	3,580
	1,739	2.88	0.24	0.71	0.85	2.08	522
With others	7,386	86.70	3.54	6.55	2.45	0.77	2,687
	722	2.44	1.70	1.95	0.39	0.33	247

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$88,293	87.18	1.07	7.90	2.38	1.47	\$2,410
	3,073	1.10	0.17	1.09	0.36	0.36	83.45
<b>Race/Ethnicity</b>							
White non-Hispanic	71,162	86.79	0.63	9.12	2.28	1.18	2,358
	2,883	1.29	0.06	1.36	0.43	0.27	94
Black non-Hispanic	9,427	89.76	3.52	2.63	3.13	0.95	2,895
	844	1.63	1.44	0.60	0.60	0.36	262
Hispanic	5,032	85.11	2.56	1.87	3.35	7.11	2,243
	867	6.05	0.48	0.47	1.58	4.79	354
Other	2,568	92.49	1.23	5.43	0.45	0.40	3,012
	665	3.83	0.46	3.83	0.22	0.30	715
<b>Income</b>							
Less than \$2,500	1,279	87.49	1.35	3.22	5.98	1.96	1,805
	249	4.14	0.38	0.88	3.95	1.25	338
\$2,500 - \$4,999	2,056	88.06	9.54	1.52	0.73	0.14	2,627
	458	5.96	6.15	0.50	0.32	0.11	577
\$5,000 - \$7,499	12,229	91.78	3.29	2.37	2.44	0.12	2,844
	1,786	1.28	0.42	0.59	0.68	0.06	404
\$7,500 - \$9,999	11,613	86.52	1.85	9.08	1.71	0.84	2,889
	1,238	3.52	0.29	3.62	0.39	0.62	295
\$10,000 - \$14,999	16,457	88.26	0.48	5.54	3.08	2.64	2,545
	1,189	2.02	0.11	0.82	0.61	1.52	183
\$15,000 - \$19,999	11,189	84.03	0.17	13.03	1.54	1.22	2,335
	1,343	5.93	0.11	5.97	0.51	0.39	253
\$20,000 - \$24,999	11,699	88.76	0.07	6.09	2.93	2.15	2,890
	1,730	2.88	0.04	1.08	1.96	0.89	422
\$25,000 - \$29,999	4,998	79.71	0.07	12.22	5.97	2.03	1,961
	625	4.90	0.05	4.20	2.97	1.35	241
\$30,000 or more	16,773	86.33	0.00	11.14	1.13	1.39	1,871
	1,473	1.76	0.01	1.70	0.25	0.86	159

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$88,293	87.18	1.07	7.90	2.38	1.47	\$2,410
	<i>3,073</i>	<i>1.10</i>	<i>0.17</i>	<i>1.09</i>	<i>0.36</i>	<i>0.36</i>	<i>83.45</i>
<b>Health Status</b>							
Excellent	5,517	92.71	0.50	4.90	1.40	0.49	899
	<i>482</i>	<i>0.98</i>	<i>0.12</i>	<i>0.59</i>	<i>0.56</i>	<i>0.32</i>	<i>76</i>
Very good	12,510	87.75	0.41	8.28	1.26	2.30	1,270
	<i>745</i>	<i>1.54</i>	<i>0.08</i>	<i>1.12</i>	<i>0.23</i>	<i>0.94</i>	<i>71</i>
Good	24,430	90.17	0.65	5.92	2.29	0.97	2,228
	<i>1,691</i>	<i>1.03</i>	<i>0.09</i>	<i>0.64</i>	<i>0.75</i>	<i>0.39</i>	<i>142</i>
Fair	22,717	85.90	1.80	6.63	3.20	2.48	3,612
	<i>1,489</i>	<i>1.85</i>	<i>0.57</i>	<i>1.01</i>	<i>1.06</i>	<i>1.18</i>	<i>215</i>
Poor	22,775	83.73	1.30	11.69	2.48	0.80	6,866
	<i>2,832</i>	<i>3.96</i>	<i>0.21</i>	<i>3.86</i>	<i>0.59</i>	<i>0.28</i>	<i>765</i>
<b>Functional Limitation</b>							
None	31,527	87.79	0.99	7.94	1.51	1.77	1,445
	<i>1,585</i>	<i>1.02</i>	<i>0.41</i>	<i>0.97</i>	<i>0.22</i>	<i>0.45</i>	<i>69</i>
IADL only <sup>4</sup>	25,023	85.01	0.95	9.62	2.86	1.56	3,188
	<i>2,064</i>	<i>3.10</i>	<i>0.14</i>	<i>2.98</i>	<i>0.86</i>	<i>1.00</i>	<i>248</i>
One to two ADLs <sup>5</sup>	14,253	90.12	1.24	4.80	3.26	0.59	3,192
	<i>1,186</i>	<i>1.50</i>	<i>0.16</i>	<i>0.70</i>	<i>1.65</i>	<i>0.23</i>	<i>252</i>
Three to five ADLs	17,294	86.70	1.23	8.00	2.52	1.55	7,020
	<i>2,067</i>	<i>3.02</i>	<i>0.20</i>	<i>2.35</i>	<i>0.71</i>	<i>0.71</i>	<i>831</i>

**Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$88,293	87.18	1.07	7.90	2.38	1.47	\$2,410
	<i>3,073</i>	<i>1.10</i>	<i>0.17</i>	<i>1.09</i>	<i>0.36</i>	<i>0.36</i>	<i>83.45</i>
<b>Metropolitan Area Resident</b>							
Yes	66,832	88.23	1.06	6.79	2.50	1.42	2,485
	<i>2,793</i>	<i>0.83</i>	<i>0.22</i>	<i>0.82</i>	<i>0.45</i>	<i>0.43</i>	<i>102</i>
No	21,407	83.88	1.08	11.39	2.01	1.63	2,206
	<i>1,496</i>	<i>3.43</i>	<i>0.16</i>	<i>3.50</i>	<i>0.40</i>	<i>0.73</i>	<i>148</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$25,854	61.51	2.95	23.11	9.64	2.79	\$706
	881	0.83	0.26	0.81	0.48	0.36	24
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	11,316	59.10	1.90	25.80	9.93	3.27	605
	637	1.16	0.26	1.15	0.69	0.55	34
75 - 84 years	7,047	61.79	1.87	25.50	9.19	1.65	655
	345	1.26	0.30	1.10	1.02	0.52	32
85 years and older	1,500	64.74	2.49	23.33	8.08	1.36	524
	162	1.56	0.38	1.34	1.42	0.65	54
<b>Disabled</b>							
Under 45 years	1,939	64.40	9.18	12.56	11.44	2.42	1,335
	313	4.93	2.20	4.68	2.35	0.68	208
45 - 64 years	4,052	65.18	4.95	16.40	9.35	4.13	1,424
	571	2.95	0.89	2.78	1.15	1.14	196
<b>Gender</b>							
Male	12,306	59.31	2.14	24.12	9.84	4.60	758
	548	1.32	0.27	1.42	0.65	0.61	33
Female	13,549	63.52	3.68	22.19	9.46	1.15	664
	640	1.05	0.42	1.04	0.71	0.40	31
<b>Living Arrangement</b>							
Alone	7,122	63.25	4.09	21.65	9.14	1.87	651
	301	1.13	0.46	1.33	0.74	0.37	27
With spouse	13,657	58.23	1.52	27.75	9.25	3.26	694
	689	1.27	0.35	1.24	0.65	0.55	35
With children	2,630	66.61	4.84	13.39	12.36	2.80	808
	410	2.75	0.87	2.41	2.23	1.50	119
With others	2,444	69.31	5.56	11.88	10.41	2.84	889
	334	1.78	0.93	1.81	1.49	0.94	114



**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$25,854	61.51	2.95	23.11	9.64	2.79	\$706
	881	0.83	0.26	0.81	0.48	0.36	24
<b>Race/Ethnicity</b>							
White non-Hispanic	18,836	58.00	1.79	28.00	9.84	2.37	624
	656	0.88	0.24	0.95	0.57	0.40	21
Black non-Hispanic	4,176	71.19	4.70	10.68	9.89	3.54	1,282
	509	1.54	0.69	1.71	1.23	1.04	161
Hispanic	1,961	70.96	8.16	8.59	7.47	4.82	874
	357	2.33	1.52	1.85	1.43	1.83	151
Other	866	70.12	7.83	9.85	9.03	3.16	1,016
	230	5.36	2.43	3.31	3.60	1.96	261
<b>Income</b>							
Less than \$2,500	728	65.20	1.77	17.73	9.59	5.72	1,028
	231	2.77	0.96	3.43	3.29	2.26	313
\$2,500 - \$4,999	537	62.06	14.53	9.67	5.48	8.27	686
	87	4.53	1.94	2.27	1.20	6.01	108
\$5,000 - \$7,499	2,840	70.35	12.27	5.64	10.59	1.15	661
	268	1.55	0.95	0.96	1.72	0.36	59
\$7,500 - \$9,999	3,099	65.54	5.83	14.02	11.21	3.40	771
	271	2.84	0.82	2.99	1.56	0.93	67
\$10,000 - \$14,999	4,872	66.34	1.66	19.50	10.16	2.33	753
	484	1.71	0.42	1.89	1.04	0.60	75
\$15,000 - \$19,999	3,919	59.20	1.40	27.43	10.54	1.44	818
	454	2.62	0.89	2.38	1.54	0.42	89
\$20,000 - \$24,999	2,860	55.60	0.08	30.49	10.68	3.15	707
	267	2.12	0.05	1.93	1.62	0.90	63
\$25,000 - \$29,999	1,522	59.99	0.11	30.50	7.38	2.02	597
	190	2.38	0.06	1.77	1.67	1.61	69
\$30,000 or more	5,476	54.99	0.04	33.54	7.67	3.77	611
	317	1.73	0.02	1.74	0.49	1.01	32

**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$25,854	61.51	2.95	23.11	9.64	2.79	\$706
	881	0.83	0.26	0.81	0.48	0.36	24
<b>Health Status</b>							
Excellent	2,639	59.17	0.60	27.81	9.62	2.80	430
	338	2.33	0.18	2.49	0.96	1.24	54
Very good	4,183	62.33	1.59	26.47	8.17	1.44	425
	254	1.39	0.30	1.60	0.72	0.39	23
Good	7,092	60.11	2.51	24.75	10.44	2.19	647
	400	1.37	0.24	1.58	1.04	0.46	32
Fair	6,927	63.87	3.02	19.84	8.89	4.38	1,101
	624	2.09	0.47	1.89	0.87	0.89	95
Poor	4,945	60.78	5.91	20.03	10.71	2.57	1,491
	513	2.27	1.04	2.32	1.50	0.88	142
<b>Functional Limitation</b>							
None	11,258	60.58	1.85	25.68	9.78	2.11	516
	548	1.25	0.21	1.30	0.65	0.35	25
IADL only <sup>4</sup>	7,752	63.90	2.97	22.02	8.07	3.04	988
	598	1.42	0.44	1.36	0.77	0.73	72
One to two ADLs <sup>5</sup>	4,249	61.36	4.17	19.20	11.38	3.90	951
	419	2.19	0.59	1.97	1.64	1.15	89
Three to five ADLs	2,561	58.70	5.73	21.67	10.76	3.15	1,040
	312	3.38	1.64	2.47	1.76	1.24	121

**Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
<b>All Beneficiaries</b>	\$25,854	61.51	2.95	23.11	9.64	2.79	\$706
	<i>881</i>	<i>0.83</i>	<i>0.26</i>	<i>0.81</i>	<i>0.48</i>	<i>0.36</i>	<i>24</i>
<b>Metropolitan Area Resident</b>							
Yes	19,037	62.08	2.75	23.09	9.54	2.54	708
	<i>800</i>	<i>1.03</i>	<i>0.28</i>	<i>1.00</i>	<i>0.63</i>	<i>0.36</i>	<i>30</i>
No	6,743	60.12	3.53	23.16	9.67	3.52	695
	<i>432</i>	<i>1.41</i>	<i>0.59</i>	<i>1.47</i>	<i>0.66</i>	<i>0.81</i>	<i>40</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$72,576	63.70	2.65	15.00	17.57	1.07	\$1,981
	1,352	0.69	0.47	0.51	0.58	0.17	36
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	31,684	65.13	1.62	15.70	16.48	1.06	1,693
	1,064	0.77	0.19	0.61	0.60	0.33	52
75 - 84 years	24,378	66.16	1.19	14.61	17.42	0.62	2,266
	831	1.16	0.14	0.59	1.27	0.10	71
85 years and older	6,535	65.78	1.99	11.75	19.92	0.56	2,282
	308	1.31	0.27	0.42	1.51	0.19	91
<b>Disabled</b>							
Under 45 years	3,207	48.59	20.03	10.73	17.94	2.71	2,208
	463	6.18	8.42	2.48	2.96	0.83	310
45 - 64 years	6,772	53.32	5.14	18.28	20.80	2.46	2,380
	629	4.10	0.98	3.66	3.41	0.78	215
<b>Gender</b>							
Male	33,039	63.58	1.76	15.63	17.32	1.72	2,036
	1,006	1.18	0.23	0.64	1.19	0.35	59
Female	39,537	63.81	3.40	14.48	17.78	0.53	1,938
	973	1.05	0.83	0.82	0.70	0.08	45
<b>Living Arrangement</b>							
Alone	21,725	64.81	2.98	14.27	16.50	1.44	1,985
	919	1.50	0.34	1.42	0.79	0.52	76
With spouse	37,494	63.07	1.68	17.29	17.07	0.89	1,906
	1,173	0.92	0.88	0.51	0.82	0.12	50
With children	7,454	65.07	4.94	9.83	19.63	0.53	2,289
	503	1.80	0.56	0.90	1.90	0.13	133
With others	5,900	61.93	4.75	9.67	22.09	1.56	2,147
	505	3.65	0.73	1.14	3.81	0.51	162

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$72,576	63.70	2.65	15.00	17.57	1.07	\$1,981
	1,352	0.69	0.47	0.51	0.58	0.17	36
<b>Race/Ethnicity</b>							
White non-Hispanic	59,433	62.99	2.05	16.55	17.52	0.90	1,969
	1,289	0.69	0.56	0.56	0.54	0.12	40
Black non-Hispanic	6,914	64.26	5.73	8.76	18.51	2.75	2,124
	553	3.63	0.85	1.28	3.69	1.37	172
Hispanic	4,392	71.11	5.05	6.32	16.70	0.83	1,957
	317	2.52	0.51	0.83	2.77	0.18	116
Other	1,750	68.30	5.09	8.20	17.38	1.03	2,053
	216	3.80	1.02	1.26	4.03	0.44	206
<b>Income</b>							
Less than \$2,500	1,535	62.25	4.25	9.72	21.45	2.33	2,166
	266	4.55	3.05	2.24	4.77	1.82	326
\$2,500 - \$4,999	1,551	68.84	8.94	7.14	13.32	1.75	1,982
	272	3.67	1.32	2.83	2.47	0.92	324
\$5,000 - \$7,499	7,697	68.59	9.74	4.94	15.91	0.82	1,790
	496	1.72	0.63	0.67	1.87	0.21	93
\$7,500 - \$9,999	8,148	63.71	5.25	11.82	17.30	1.92	2,027
	578	2.96	0.61	3.23	1.35	0.66	124
\$10,000 - \$14,999	13,143	65.23	1.25	12.42	20.12	0.98	2,032
	794	1.77	0.20	0.48	2.00	0.18	113
\$15,000 - \$19,999	9,778	61.24	3.65	15.29	19.07	0.75	2,041
	726	2.96	3.26	0.94	2.63	0.21	127
\$20,000 - \$24,999	8,495	64.09	0.10	18.09	16.04	1.69	2,098
	555	1.57	0.04	0.86	1.16	1.09	116
\$25,000 - \$29,999	4,569	65.19	0.14	19.23	14.98	0.46	1,793
	277	1.26	0.12	1.39	0.80	0.18	101
\$30,000 or more	17,659	60.91	0.03	21.18	17.14	0.73	1,970
	694	1.14	0.01	0.93	0.73	0.18	64

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$72,576	63.70	2.65	15.00	17.57	1.07	\$1,981
	<i>1,352</i>	<i>0.69</i>	<i>0.47</i>	<i>0.51</i>	<i>0.58</i>	<i>0.17</i>	<i>36</i>
<b>Health Status</b>							
Excellent	6,929	64.16	0.70	15.39	18.98	0.77	1,130
	<i>319</i>	<i>1.50</i>	<i>0.12</i>	<i>0.77</i>	<i>1.20</i>	<i>0.31</i>	<i>44</i>
Very good	13,961	64.19	0.80	16.82	17.41	0.78	1,418
	<i>473</i>	<i>1.10</i>	<i>0.11</i>	<i>1.13</i>	<i>0.74</i>	<i>0.24</i>	<i>42</i>
Good	21,768	65.07	2.15	14.32	17.45	1.01	1,985
	<i>809</i>	<i>0.89</i>	<i>0.23</i>	<i>0.52</i>	<i>0.92</i>	<i>0.15</i>	<i>61</i>
Fair	16,074	63.80	3.14	13.85	17.61	1.60	2,556
	<i>771</i>	<i>1.79</i>	<i>0.37</i>	<i>0.75</i>	<i>1.69</i>	<i>0.58</i>	<i>101</i>
Poor	13,674	60.77	5.79	15.32	17.13	1.00	4,122
	<i>1,030</i>	<i>2.85</i>	<i>2.38</i>	<i>2.20</i>	<i>2.10</i>	<i>0.30</i>	<i>275</i>
<b>Functional Limitation</b>							
None	32,166	65.37	1.08	16.47	16.03	1.04	1,475
	<i>781</i>	<i>0.67</i>	<i>0.11</i>	<i>0.60</i>	<i>0.52</i>	<i>0.30</i>	<i>32</i>
IADL only <sup>4</sup>	17,787	65.85	2.18	14.29	16.32	1.35	2,266
	<i>796</i>	<i>1.51</i>	<i>0.25</i>	<i>0.65</i>	<i>1.50</i>	<i>0.34</i>	<i>87</i>
One to two ADLs <sup>5</sup>	11,633	63.99	3.40	13.43	18.28	0.90	2,605
	<i>638</i>	<i>1.46</i>	<i>0.45</i>	<i>0.99</i>	<i>1.12</i>	<i>0.17</i>	<i>117</i>
Three to five ADLs	10,938	55.01	7.27	13.51	23.33	0.89	4,440
	<i>855</i>	<i>3.15</i>	<i>2.90</i>	<i>2.52</i>	<i>2.31</i>	<i>0.25</i>	<i>336</i>

**Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$72,576	63.70	2.65	15.00	17.57	1.07	\$1,981
	<i>1,352</i>	<i>0.69</i>	<i>0.47</i>	<i>0.51</i>	<i>0.58</i>	<i>0.17</i>	<i>36</i>
<b>Metropolitan Area Resident</b>							
Yes	57,141	64.71	2.65	14.71	16.97	0.96	2,125
	<i>1,219</i>	<i>0.83</i>	<i>0.59</i>	<i>0.58</i>	<i>0.69</i>	<i>0.14</i>	<i>43</i>
No	15,397	60.09	2.67	16.08	19.68	1.49	1,587
	<i>521</i>	<i>1.26</i>	<i>0.34</i>	<i>0.98</i>	<i>0.98</i>	<i>0.59</i>	<i>49</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$7,443	0.98	1.30	14.17	81.81	1.74	\$203
	305	0.08	0.22	0.87	1.05	0.37	8
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	4,170	0.78	0.85	16.70	79.84	1.83	223
	244	0.07	0.29	1.35	1.58	0.63	13
75 - 84 years	2,338	1.32	0.52	10.74	86.30	1.12	217
	159	0.24	0.22	1.39	1.51	0.41	15
85 years and older	349	1.77	0.10	8.29	88.57	1.26	122
	37	0.24	0.09	2.44	2.47	0.69	13
<b>Disabled</b>							
Under 45 years	189	0.29	9.92	8.86	76.68	4.24	130
	47	0.18	3.33	3.01	6.35	2.13	32
45 - 64 years	398	0.72	7.55	15.40	72.59	3.74	140
	71	0.22	2.50	3.22	4.46	1.30	25
<b>Gender</b>							
Male	3,538	1.04	1.13	15.31	80.05	2.46	218
	195	0.15	0.37	1.55	1.87	0.69	12
Female	3,905	0.92	1.46	13.13	83.40	1.09	191
	222	0.07	0.28	0.90	1.12	0.34	11
<b>Living Arrangement</b>							
Alone	1,890	1.05	1.87	11.42	85.02	0.65	173
	143	0.10	0.52	1.29	1.42	0.25	12
With spouse	4,686	0.90	0.64	15.97	80.33	2.17	238
	239	0.12	0.22	1.32	1.49	0.55	12
With children	342	1.91	4.75	9.62	82.33	1.39	105
	49	0.36	2.18	2.97	3.30	0.73	15
With others	525	0.87	2.95	10.94	83.14	2.11	191
	94	0.20	1.11	2.52	2.76	0.91	34



**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$7,443	0.98	1.30	14.17	81.81	1.74	\$203
	305	0.08	0.22	0.87	1.05	0.37	8
<b>Race/Ethnicity</b>							
White non-Hispanic	6,755	0.86	0.65	13.83	83.05	1.61	224
	293	0.09	0.14	0.90	1.06	0.40	10
Black non-Hispanic	273	1.98	5.32	21.98	67.06	3.67	84
	37	0.35	2.45	5.69	5.41	2.00	11
Hispanic	287	2.45	9.46	11.82	73.87	2.41	128
	45	0.49	3.76	2.94	4.99	0.74	21
Other	122	1.82	9.54	20.33	65.30	3.01	143
	27	0.52	4.41	8.05	7.57	2.23	31
<b>Income</b>							
Less than \$2,500	91	6.02	2.44	7.19	81.48	2.87	129
	28	2.83	1.39	2.86	5.24	2.08	39
\$2,500 - \$4,999	62	1.49	5.74	13.91	75.17	3.69	79
	20	0.73	4.21	5.27	7.71	2.27	23
\$5,000 - \$7,499	507	0.92	7.69	1.72	88.10	1.57	118
	159	0.35	3.49	0.74	4.70	0.87	37
\$7,500 - \$9,999	339	2.09	6.56	4.13	85.50	1.72	84
	64	0.48	2.24	1.52	3.44	1.03	16
\$10,000 - \$14,999	908	1.70	2.30	8.42	86.21	1.36	140
	110	0.47	1.02	1.18	1.76	0.62	16
\$15,000 - \$19,999	819	1.27	0.77	15.41	82.01	0.54	171
	93	0.19	0.48	2.80	2.95	0.35	21
\$20,000 - \$24,999	798	0.88	0.09	19.23	76.56	3.23	197
	72	0.14	0.08	2.59	2.75	1.18	17
\$25,000 - \$29,999	452	1.00	0.00	14.66	83.55	0.79	178
	43	0.16	0.00	3.06	3.01	0.58	15
\$30,000 or more	3,466	0.50	0.06	17.14	80.43	1.87	387
	185	0.05	0.04	1.54	1.71	0.73	18

**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$7,443	0.98	1.30	14.17	81.81	1.74	\$203
	305	0.08	0.22	0.87	1.05	0.37	8
<b>Health Status</b>							
Excellent	1,458	1.02	0.51	14.13	83.92	0.42	238
	92	0.25	0.27	1.84	1.87	0.23	14
Very good	2,165	1.10	0.54	13.98	83.84	0.52	220
	133	0.17	0.32	1.53	1.66	0.15	14
Good	2,526	0.84	1.07	13.36	82.07	2.67	230
	231	0.09	0.33	1.49	1.88	0.97	21
Fair	955	0.91	3.38	16.05	75.73	3.92	152
	100	0.13	0.85	2.98	3.28	1.39	15
Poor	337	1.28	5.51	16.05	75.01	2.15	102
	48	0.31	1.71	3.73	3.52	1.04	14
<b>Functional Limitation</b>							
None	4,936	0.90	0.95	14.69	81.83	1.64	226
	249	0.09	0.26	1.25	1.40	0.48	12
IADL only <sup>4</sup>	1,287	1.16	1.95	13.95	81.38	1.56	164
	95	0.14	0.46	1.29	1.42	0.49	12
One to two ADLs <sup>5</sup>	917	1.10	1.51	11.58	83.54	2.27	205
	112	0.41	0.49	2.35	2.58	1.17	25
Three to five ADLs	303	1.18	3.74	14.41	78.06	2.61	123
	49	0.26	2.02	3.41	3.72	1.55	20

**Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$7,443	0.98	1.30	14.17	81.81	1.74	\$203
	<i>305</i>	<i>0.08</i>	<i>0.22</i>	<i>0.87</i>	<i>1.05</i>	<i>0.37</i>	<i>8</i>
<b>Metropolitan Area Resident</b>							
Yes	5,994	1.19	1.31	14.29	81.45	1.77	223
	<i>283</i>	<i>0.11</i>	<i>0.26</i>	<i>0.92</i>	<i>1.14</i>	<i>0.44</i>	<i>11</i>
No	1,437	0.13	1.27	13.75	83.19	1.65	148
	<i>140</i>	<i>0.03</i>	<i>0.40</i>	<i>2.34</i>	<i>2.57</i>	<i>0.51</i>	<i>14</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$24,495	3.83	11.15	32.58	45.39	7.06	\$669
	416	0.16	0.58	0.81	0.60	0.43	11
<b>Medicare Status<sup>3</sup></b>							
<b>Aged</b>							
65 - 74 years	11,161	4.36	7.34	36.88	45.57	5.85	597
	304	0.27	0.79	1.11	0.91	0.48	15
75 - 84 years	7,220	4.38	7.41	31.34	49.52	7.35	671
	179	0.27	0.73	1.24	1.04	0.74	15
85 years and older	1,845	4.65	9.90	23.82	54.92	6.72	644
	79	0.41	1.22	1.54	1.77	1.10	25
<b>Disabled</b>							
Under 45 years	1,181	0.73	45.37	17.38	27.96	8.55	813
	81	0.37	3.21	2.77	2.52	1.79	52
45 - 64 years	3,087	1.33	21.34	30.95	36.05	10.34	1,085
	222	0.30	2.73	3.17	2.00	1.61	71
<b>Gender</b>							
Male	10,005	4.26	8.99	33.49	44.16	9.10	616
	245	0.25	0.90	1.12	1.03	0.69	14
Female	14,489	3.53	12.65	31.95	46.23	5.64	710
	344	0.20	0.83	1.04	0.73	0.55	16
<b>Living Arrangement</b>							
Alone	7,477	3.60	16.53	27.12	44.79	7.96	683
	270	0.25	1.41	1.72	1.05	0.93	22
With spouse	13,022	3.92	3.85	40.19	46.01	6.03	662
	271	0.23	0.45	1.02	0.87	0.45	12
With children	2,161	4.24	21.25	17.35	48.22	8.94	664
	127	0.52	2.43	1.61	2.30	1.88	34
With others	1,835	3.61	29.18	18.69	40.07	8.45	668
	110	0.40	2.47	2.10	1.74	1.53	31

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
<b>All Beneficiaries</b>	\$24,495	3.83	11.15	32.58	45.39	7.06	\$669
	416	0.16	0.58	0.81	0.60	0.43	11
<b>Race/Ethnicity</b>							
White non-Hispanic	20,514	3.54	8.29	34.74	46.72	6.71	680
	375	0.17	0.54	0.85	0.67	0.50	12
Black non-Hispanic	1,959	3.93	26.32	21.57	40.22	7.96	602
	115	0.52	2.24	3.12	2.07	1.10	37
Hispanic	1,464	6.94	27.39	20.64	37.16	7.87	653
	137	0.84	3.57	4.78	1.87	2.18	62
Other	497	6.46	20.30	21.42	36.39	15.43	583
	57	1.02	4.49	4.43	4.04	4.40	56
<b>Income</b>							
Less than \$2,500	427	7.71	11.78	25.55	41.68	13.28	602
	59	2.21	3.07	4.53	3.49	3.38	60
\$2,500 - \$4,999	485	2.72	39.42	11.88	39.50	6.49	619
	50	0.69	5.17	3.06	4.00	1.82	58
\$5,000 - \$7,499	2,848	2.36	51.78	8.46	30.03	7.37	662
	171	0.31	2.04	1.23	1.59	1.13	30
\$7,500 - \$9,999	2,721	3.73	25.92	13.81	46.81	9.72	677
	153	0.38	2.38	1.39	1.96	0.94	33
\$10,000 - \$14,999	4,120	4.15	5.46	27.13	52.95	10.30	637
	218	0.33	0.78	1.89	1.82	1.94	25
\$15,000 - \$19,999	3,141	4.22	1.90	35.29	51.28	7.30	656
	139	0.37	0.50	1.90	1.82	1.09	22
\$20,000 - \$24,999	2,896	3.65	0.11	41.52	47.31	7.41	715
	171	0.54	0.05	2.45	2.00	1.19	31
\$25,000 - \$29,999	1,675	3.91	0.28	44.56	47.54	3.72	657
	112	0.56	0.21	2.69	2.54	1.36	38
\$30,000 or more	6,181	4.01	0.28	48.87	43.04	3.80	690
	211	0.33	0.14	1.18	1.14	0.63	19

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$24,495	3.83	11.15	32.58	45.39	7.06	\$669
	416	0.16	0.58	0.81	0.60	0.43	11
<b>Health Status</b>							
Excellent	2,200	7.69	3.50	39.54	43.19	6.09	359
	101	0.69	0.65	2.04	1.58	1.20	15
Very good	4,947	5.52	5.63	35.76	47.98	5.10	502
	196	0.38	1.01	1.18	1.14	0.79	14
Good	7,356	4.20	8.77	33.32	47.01	6.69	671
	243	0.26	0.74	1.18	1.06	0.77	15
Fair	6,035	1.97	15.72	29.04	44.06	9.22	960
	260	0.18	1.24	1.76	1.31	0.93	27
Poor	3,883	1.72	20.06	28.62	42.09	7.49	1,170
	233	0.33	2.34	3.03	2.10	1.19	53
<b>Functional Limitation</b>							
None	11,096	5.06	6.66	35.14	47.07	6.08	509
	250	0.22	0.49	0.89	0.86	0.48	10
IADL only <sup>4</sup>	6,533	3.54	13.37	31.85	43.77	7.46	832
	256	0.36	1.36	1.51	1.30	0.88	26
One to two ADLs <sup>5</sup>	4,106	2.23	15.18	28.58	44.81	9.21	919
	192	0.24	1.75	1.90	1.44	1.16	34
Three to five ADLs	2,741	1.94	18.10	29.80	43.33	6.83	1,113
	196	0.28	2.09	3.69	2.53	1.41	75

**Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$24,495	3.83	11.15	32.58	45.39	7.06	\$669
	<i>416</i>	<i>0.16</i>	<i>0.58</i>	<i>0.81</i>	<i>0.60</i>	<i>0.43</i>	<i>11</i>
<b>Metropolitan Area Resident</b>							
Yes	18,151	4.95	9.86	35.07	42.20	7.92	675
	<i>380</i>	<i>0.20</i>	<i>0.63</i>	<i>0.96</i>	<i>0.71</i>	<i>0.54</i>	<i>13</i>
No	6,316	0.62	14.91	25.28	54.59	4.60	651
	<i>190</i>	<i>0.24</i>	<i>1.32</i>	<i>1.33</i>	<i>1.17</i>	<i>0.46</i>	<i>18</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 3)**

Long-Term Care Facility Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$) <sup>3</sup>	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$82,942	8.65	44.13	1.81	34.09	11.31	\$29,771
	3,753	0.77	1.49	0.28	1.30	1.31	888
<b>Medicare Status<sup>4</sup></b>							
<b>Aged</b>							
65 - 74 years	9,693	14.33	42.92	2.35	27.70	12.71	25,424
	1,261	4.31	6.63	0.96	4.03	4.11	1,608
75 - 84 years	25,749	12.37	41.03	2.62	36.98	6.99	30,215
	2,070	1.46	2.78	0.56	2.76	1.88	1,363
85 years and older	32,295	6.85	43.61	1.26	43.95	4.32	26,934
	1,418	0.68	1.85	0.23	1.74	0.66	723
<b>Disabled</b>							
Under 45 years	8,764	2.80	50.69	1.86	11.29	33.37	50,917
	1,100	1.07	5.30	1.56	4.28	4.90	5,571
45 - 64 years	6,442	2.26	52.00	0.45	13.74	31.55	35,513
	1,125	0.97	5.84	0.32	2.09	6.08	3,858
<b>Gender</b>							
Male	26,810	7.30	43.82	2.08	28.84	17.96	29,736
	2,104	1.10	2.95	0.54	2.61	2.81	1,578
Female	56,132	9.30	44.28	1.68	36.60	8.14	29,788
	2,566	0.99	1.87	0.29	1.50	1.15	866
<b>Race/Ethnicity</b>							
White non-Hispanic	70,656	8.12	42.61	2.00	37.28	9.99	29,498
	3,428	0.80	1.53	0.32	1.49	1.25	936
Black non-Hispanic	6,543	10.45	57.52	1.08	13.81	17.14	28,258
	986	2.66	5.76	0.46	2.28	3.66	2,555
Hispanic	2,448	13.97	66.79	0.00	13.91	5.33	34,329
	639	8.68	7.62	0.00	3.52	2.34	6,367
Other	1,795	20.55	31.67	0.66	21.46	25.66	34,000
	549	5.96	8.96	0.70	7.44	12.78	7,116



**Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 3)**

Long-Term Care Facility Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$) <sup>3</sup>	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$82,942	8.65	44.13	1.81	34.09	11.31	\$29,771
	3,753	0.77	1.49	0.28	1.30	1.31	888
<b>Income</b>							
Less than \$2,500	1,895	11.79	44.04	5.95	25.95	12.28	23,798
	470	3.36	7.58	3.28	5.47	6.08	4,041
\$2,500 - \$4,999	4,896	6.35	56.32	1.19	17.27	18.87	33,344
	937	2.39	6.25	0.63	3.89	5.47	5,189
\$5,000 - \$7,499	26,605	7.15	59.13	1.48	20.53	11.70	30,967
	2,399	1.06	2.21	0.60	1.77	2.56	1,864
\$7,500 - \$9,999	17,980	9.15	44.85	1.36	30.63	14.02	28,607
	1,632	1.77	2.86	0.44	2.82	3.83	1,778
\$10,000 - \$14,999	14,029	8.70	38.44	2.13	39.55	11.19	29,511
	1,394	1.43	4.15	0.57	3.72	3.67	1,769
\$15,000 - \$19,999	4,280	8.06	22.99	1.86	60.22	6.88	26,779
	519	2.74	6.27	0.90	5.91	2.28	2,079
\$20,000 - \$24,999	3,826	8.25	28.07	1.14	61.08	1.46	33,561
	732	3.02	7.20	0.67	8.67	0.84	3,625
\$25,000 - \$29,999	2,114	11.85	10.89	7.33	54.05	15.87	24,963
	376	4.59	6.16	4.07	7.76	4.65	3,181
\$30,000 or more	7,316	13.18	20.94	1.60	59.65	4.63	30,749
	1,088	4.84	5.84	0.70	5.88	1.36	2,960
<b>Health Status</b>							
Excellent	2,335	7.38	52.23	0.47	18.02	21.90	37,357
	709	3.74	8.88	0.33	6.23	9.15	10,681
Very good	8,968	6.15	42.84	1.93	33.92	15.16	27,688
	1,182	1.53	4.17	0.81	4.51	3.56	2,599
Good	29,301	6.87	47.07	1.56	31.93	12.57	32,018
	2,162	0.94	2.63	0.40	2.23	2.69	1,404
Fair	30,805	8.38	41.99	1.52	39.20	8.91	30,114
	2,085	1.18	2.28	0.38	2.27	1.82	1,122
Poor	11,377	15.93	42.30	3.46	28.79	9.53	24,839
	1,272	3.34	4.14	1.07	3.06	3.74	1,654

**Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 3)**

Long-Term Care Facility Residents<sup>1</sup>

Beneficiary Characteristic <sup>2</sup>	Total Expenditures (millions of \$) <sup>3</sup>	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
<b>All Beneficiaries</b>	\$82,942	8.65	44.13	1.81	34.09	11.31	\$29,771
	<i>3,753</i>	<i>0.77</i>	<i>1.49</i>	<i>0.28</i>	<i>1.30</i>	<i>1.31</i>	<i>888</i>
<b>Functional Limitation</b>							
None	1,840	25.53	12.36	6.62	11.27	44.21	24,735
	<i>626</i>	<i>7.16</i>	<i>7.57</i>	<i>3.23</i>	<i>5.27</i>	<i>16.46</i>	<i>6,380</i>
IADL only <sup>5</sup>	5,814	6.26	39.94	0.28	21.25	32.26	24,977
	<i>777</i>	<i>2.08</i>	<i>6.36</i>	<i>0.21</i>	<i>4.30</i>	<i>6.08</i>	<i>2,696</i>
One to two ADLs <sup>6</sup>	13,393	8.97	38.82	1.46	38.65	12.10	25,086
	<i>1,428</i>	<i>1.68</i>	<i>3.39</i>	<i>0.60</i>	<i>3.30</i>	<i>2.77</i>	<i>1,905</i>
Three to five ADLs	60,262	8.44	47.42	1.93	35.26	6.95	32,155
	<i>3,121</i>	<i>0.90</i>	<i>1.58</i>	<i>0.34</i>	<i>1.53</i>	<i>1.14</i>	<i>994</i>
<b>Metropolitan Area Resident</b>							
Yes	64,770	9.27	43.84	1.56	32.91	12.43	32,217
	<i>3,440</i>	<i>0.95</i>	<i>1.82</i>	<i>0.28</i>	<i>1.59</i>	<i>1.60</i>	<i>1,147</i>
No	18,171	6.45	45.16	2.73	38.32	7.35	23,432
	<i>1,303</i>	<i>0.81</i>	<i>2.39</i>	<i>0.76</i>	<i>1.71</i>	<i>1.72</i>	<i>892</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

1 The term *long-term care facility residents* includes beneficiaries who resided only in a long-term care facility during the year, and beneficiaries who resided part of the year in a long-term care facility and part of the year in the community. It excludes beneficiaries who resided only in the community during the year.

2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.

4 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.

5 *IADL* stands for Instrumental Activity of Daily Living.

6 *ADL* stands for Activity of Daily Living.

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,635	\$4,770	\$9,482	\$6,579	\$6,445	\$6,104
	118	322	592	226	263	505
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	5,449	3,343	10,460	5,310	5,043	5,070
	231	332	1,759	341	397	600
75 - 84 years	7,369	6,073	7,682	7,812	7,474	6,343
	208	1,093	631	480	381	713
85 years and older	8,336	8,206	10,369	7,552	7,898	10,455
	328	1,339	1,202	476	590	2,536
<b>Disabled</b>						
Under 45 years	7,767	5,070	8,924	3,936	8,223	0
	783	1,547	1,160	1,062	1,810	0
45 - 64 years	9,371	5,980	9,834	10,314	12,150	11,266
	740	789	1,288	1,909	1,778	6,453
<b>Gender</b>						
Male	7,016	4,829	10,490	7,662	6,788	6,058
	253	397	1,336	521	432	824
Female	6,333	4,693	8,905	5,897	6,125	6,138
	128	534	504	248	309	675
<b>Living Arrangement</b>						
Alone	6,475	4,362	8,692	5,835	6,813	5,801
	215	559	467	357	558	767
With spouse	6,210	4,214	11,395	6,815	5,829	5,884
	175	403	1,507	360	325	697
With children	8,857	6,102	11,069	7,081	10,053	8,489
	788	1,537	2,282	725	1,519	3,199
With others	7,688	6,469	7,573	8,486	9,404	9,471
	485	1,033	657	1,303	1,784	3,038

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,635	\$4,770	\$9,482	\$6,579	\$6,445	\$6,104
	118	322	592	226	263	505
<b>Race/Ethnicity</b>						
White non-Hispanic	6,492	4,360	11,032	6,490	6,211	6,204
	142	381	1,023	257	281	548
Black non-Hispanic	8,058	6,172	8,784	7,265	10,095	6,412
	516	709	948	1,485	1,698	2,273
Hispanic	6,328	4,087	6,560	8,151	7,175	2,708
	541	1,104	833	1,956	1,662	1,323
Other	7,404	8,202	8,394	8,627	6,267	3,776
	1,100	5,878	2,180	2,137	1,767	2,231
<b>Income</b>						
Less than \$2,500	6,348	3,189	6,981	6,434	7,019	2,538
	746	996	1,716	1,468	2,241	1,127
\$2,500 - \$4,999	7,124	1,791	10,997	4,971	3,818	1,997
	1,005	456	2,031	1,652	1,140	150
\$5,000 - \$7,499	7,053	5,196	8,199	5,920	5,133	9,629
	581	1,130	950	728	1,037	5,927
\$7,500 - \$9,999	7,520	4,955	10,559	6,263	6,824	15,923
	457	604	920	514	1,705	11,073
\$10,000 - \$14,999	6,848	5,545	10,487	6,556	7,245	6,303
	347	689	1,597	647	676	1,017
\$15,000 - \$19,999	6,519	4,394	10,836	6,813	6,919	5,676
	370	631	3,680	678	766	1,065
\$20,000 - \$24,999	7,195	4,441	20,524	7,317	7,851	5,784
	575	1,711	7,995	999	1,011	1,067
\$25,000 - \$29,999	5,768	2,711	9,679	6,423	5,428	5,411
	447	902	4,378	871	651	836
\$30,000 or more	5,921	4,639	12,625	6,526	5,705	5,795
	250	879	4,568	622	370	717

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,635	\$4,770	\$9,482	\$6,579	\$6,445	\$6,104
	118	322	592	226	263	505
<b>Health Status</b>						
Excellent	3,273	1,901	4,501	3,125	2,794	3,053
	145	368	820	301	221	493
Very good	4,103	2,689	5,390	3,758	3,923	4,314
	122	403	838	217	212	666
Good	6,289	4,829	6,718	6,753	6,484	4,890
	221	576	553	447	406	635
Fair	9,322	6,005	9,635	10,788	9,738	14,694
	348	662	1,000	714	700	2,995
Poor	16,306	8,124	18,350	18,472	20,209	14,237
	1,081	1,435	2,543	1,968	2,744	2,776
<b>Functional Limitation</b>						
None	4,329	2,785	6,024	4,389	4,006	4,165
	106	266	545	235	172	495
IADL only <sup>4</sup>	7,929	5,028	7,896	8,995	8,621	8,431
	365	610	820	624	804	1,611
One to two ADLs <sup>5</sup>	9,016	7,596	9,941	8,888	9,759	9,797
	414	1,256	1,414	641	792	1,945
Three to five ADLs	18,550	12,013	22,303	17,180	21,992	16,994
	1,338	2,141	3,166	1,945	3,195	5,065

**Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per Beneficiary</b>	\$6,635	\$4,770	\$9,482	\$6,579	\$6,445	\$6,104
	<i>118</i>	<i>322</i>	<i>592</i>	<i>226</i>	<i>263</i>	<i>505</i>
<b>Metropolitan Area Resident</b>						
Yes	6,901	5,248	9,836	7,137	6,581	6,766
	<i>143</i>	<i>453</i>	<i>696</i>	<i>307</i>	<i>299</i>	<i>628</i>
No	5,901	3,860	8,719	5,613	5,948	4,471
	<i>187</i>	<i>349</i>	<i>1,233</i>	<i>323</i>	<i>543</i>	<i>706</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B, for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.  
*ADL* stands for Activity of Daily Living.

**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$12,102	\$11,668	\$15,697	\$12,147	\$13,031	\$12,512
	434	1,106	1,371	669	848	2,023
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	12,285	9,983	20,590	12,236	12,552	11,678
	976	1,430	3,765	1,358	1,746	4,086
75 - 84 years	11,203	11,679	10,237	13,059	12,361	10,401
	401	1,856	1,122	952	664	1,381
85 years and older	9,483	12,441	10,914	8,838	9,464	15,434
	461	2,640	1,391	718	1,137	4,196
<b>Disabled</b>						
Under 45 years	15,377	17,519	15,846	11,504	11,292	0
	2,110	8,031	2,266	3,546	2,260	0
45 - 64 years	16,652	12,416	15,604	14,483	22,492	32,991
	1,757	1,958	2,427	2,276	4,371	0
<b>Gender</b>						
Male	13,433	11,555	20,794	14,035	13,919	11,745
	837	1,235	3,310	1,374	1,372	2,394
Female	10,921	11,835	12,760	10,627	12,065	13,215
	349	1,915	717	627	785	3,272
<b>Living Arrangement</b>						
Alone	10,675	10,971	12,210	10,954	11,420	12,415
	516	1,438	700	1,029	1,179	2,932
With spouse	12,406	10,243	20,120	13,065	13,461	12,784
	656	1,686	2,737	1,141	1,324	2,831
With children	14,553	14,563	19,972	11,212	15,624	14,410
	2,040	3,956	5,763	1,281	1,828	4,046
With others	12,242	14,825	14,328	11,230	12,594	9,425
	884	1,967	1,880	1,910	2,011	2,644

**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$12,102	\$11,668	\$15,697	\$12,147	\$13,031	\$12,512
	434	1,106	1,371	669	848	2,023
<b>Race/Ethnicity</b>						
White non-Hispanic	11,914	10,534	16,596	12,131	12,734	12,890
	475	1,008	2,039	762	916	2,085
Black non-Hispanic	13,601	12,138	14,532	11,661	17,843	3,880
	1,141	1,508	1,743	2,696	3,057	625
Hispanic	11,066	13,960	11,653	16,462	13,866	0
	1,509	6,084	1,599	4,780	5,542	0
Other	15,919	34,655	24,029	11,014	10,794	7,535
	2,995	24,438	4,344	2,818	2,379	0
<b>Income</b>						
Less than \$2,500	8,445	6,831	10,911	7,279	7,937	0
	1,214	2,234	2,758	1,828	2,470	0
\$2,500 - \$4,999	13,542	4,505	16,567	8,172	10,167	0
	2,401	1,144	3,317	3,590	767	0
\$5,000 - \$7,499	13,508	13,513	15,471	9,858	9,096	20,795
	1,760	2,812	2,803	1,218	1,468	12,040
\$7,500 - \$9,999	12,608	10,465	16,089	9,617	13,005	49,671
	1,103	1,667	1,936	1,006	3,279	34,258
\$10,000 - \$14,999	11,406	12,271	16,338	10,192	12,323	12,010
	695	1,681	2,810	896	1,105	3,403
\$15,000 - \$19,999	11,929	10,870	10,738	13,183	14,994	11,493
	1,125	1,631	2,099	2,002	2,834	2,773
\$20,000 - \$24,999	14,392	17,940	21,906	16,277	15,323	9,976
	1,912	12,563	5,640	3,660	3,284	3,421
\$25,000 - \$29,999	10,445	6,760	9,859	12,104	12,096	5,716
	982	1,949	5,343	2,114	1,521	454
\$30,000 or more	11,114	10,756	18,054	13,391	12,159	11,317
	732	4,302	2,290	1,735	1,023	2,404



**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$12,102	\$11,668	\$15,697	\$12,147	\$13,031	\$12,512
	434	1,106	1,371	669	848	2,023
<b>Health Status</b>						
Excellent	8,012	6,369	10,400	10,496	7,931	9,210
	651	2,129	1,724	1,494	955	4,331
Very good	8,932	9,929	12,486	8,683	10,122	10,480
	476	1,507	2,456	761	791	2,490
Good	11,373	13,506	12,504	12,781	11,808	9,873
	658	1,516	1,319	1,736	977	2,229
Fair	12,129	11,026	14,124	13,231	12,137	18,559
	627	1,782	1,433	1,391	1,124	5,571
Poor	17,716	13,037	21,159	14,111	23,554	9,465
	1,852	3,208	4,024	1,581	4,138	2,889
<b>Functional Limitation</b>						
None	10,383	8,676	14,667	11,909	10,334	9,907
	498	906	1,743	1,313	707	2,478
IADL only <sup>4</sup>	12,337	11,595	13,845	12,392	14,679	15,388
	773	1,788	1,519	1,149	1,954	5,577
One to two ADLs <sup>5</sup>	11,497	15,485	13,394	11,094	12,072	14,631
	792	3,964	2,934	1,124	935	3,379
Three to five ADLs	16,692	13,812	21,110	13,679	19,267	11,958
	1,880	2,548	4,744	1,670	4,015	3,852

**Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$12,102	\$11,668	\$15,697	\$12,147	\$13,031	\$12,512
	<i>434</i>	<i>1,106</i>	<i>1,371</i>	<i>669</i>	<i>848</i>	<i>2,023</i>
<b>Metropolitan Area Resident</b>						
Yes	12,196	12,832	16,579	12,953	12,853	13,626
	<i>528</i>	<i>1,540</i>	<i>1,838</i>	<i>957</i>	<i>884</i>	<i>2,589</i>
No	11,854	9,262	13,807	10,701	13,737	9,164
	<i>787</i>	<i>1,071</i>	<i>2,404</i>	<i>877</i>	<i>2,228</i>	<i>1,953</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B, for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,060	\$1,182	\$1,354	\$986	\$1,102	\$915
	35	140	104	62	79	101
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	940	890	1,128	936	1,043	902
	52	141	147	75	109	188
75 - 84 years	933	950	965	1,021	852	1,011
	46	237	129	93	55	109
85 years and older	751	642	773	793	744	821
	83	163	176	182	66	139
<b>Disabled</b>						
Under 45 years	2,073	1,496	1,754	406	4,020	0
	333	315	291	100	1,588	0
45 - 64 years	2,050	2,045	2,116	2,447	2,321	391
	272	596	390	1,344	517	84
<b>Gender</b>						
Male	1,179	1,382	1,395	1,090	1,224	1,151
	51	228	189	105	110	226
Female	971	888	1,332	922	997	771
	44	145	115	67	108	74
<b>Living Arrangement</b>						
Alone	941	853	1,196	928	948	857
	38	136	109	75	93	115
With spouse	1,056	1,259	1,718	1,097	1,041	787
	53	204	287	106	84	80
With children	1,267	855	1,211	646	2,328	970
	194	144	244	93	767	386
With others	1,338	1,888	1,456	621	1,447	3,085
	165	730	233	116	368	2,086

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,060	\$1,182	\$1,354	\$986	\$1,102	\$915
	35	140	104	62	79	101
<b>Race/Ethnicity</b>						
White non-Hispanic	930	935	1,198	924	961	826
	32	135	84	56	64	59
Black non-Hispanic	1,919	1,990	1,464	1,704	3,146	2,798
	234	417	221	660	824	2,146
Hispanic	1,385	823	1,446	2,186	2,050	928
	247	157	283	1,511	977	664
Other	1,708	2,135	2,334	2,110	1,042	796
	455	951	1,165	855	437	850
<b>Income</b>						
Less than \$2,500	1,742	1,006	836	2,498	2,852	7
	547	288	338	1,799	1,366	0
\$2,500 - \$4,999	1,065	331	1,667	427	682	115
	171	113	379	142	278	0
\$5,000 - \$7,499	1,011	1,991	986	637	937	405
	88	486	104	130	254	180
\$7,500 - \$9,999	1,149	1,242	1,419	935	1,143	240
	100	422	170	144	295	51
\$10,000 - \$14,999	1,133	1,219	2,126	1,018	1,170	703
	116	316	495	146	250	175
\$15,000 - \$19,999	1,218	1,070	1,773	1,120	1,373	1,247
	129	218	444	185	293	528
\$20,000 - \$24,999	1,024	798	3,970	930	1,170	927
	91	207	2,198	120	201	202
\$25,000 - \$29,999	938	650	3,967	1,081	734	1,286
	110	391	2,889	200	94	288
\$30,000 or more	907	853	1,828	907	992	834
	48	177	872	72	88	93

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,060	\$1,182	\$1,354	\$986	\$1,102	\$915
	35	140	104	62	79	101
<b>Health Status</b>						
Excellent	751	1,006	676	675	944	483
	101	359	238	111	242	109
Very good	663	578	1,014	639	668	720
	35	124	224	62	55	77
Good	940	1,068	1,122	927	963	792
	46	228	134	75	80	114
Fair	1,489	1,337	1,341	1,620	1,592	1,843
	131	275	225	261	265	627
Poor	1,945	1,788	2,007	1,715	2,452	1,636
	177	473	273	254	473	587
<b>Functional Limitation</b>						
None	822	871	1,359	750	835	717
	41	150	195	48	81	76
IADL only <sup>4</sup>	1,370	1,288	1,363	1,650	1,384	998
	97	172	193	233	183	151
One to two ADLs <sup>5</sup>	1,302	1,966	1,278	982	1,551	926
	117	579	180	90	289	185
Three to five ADLs	1,370	993	1,439	971	1,826	2,840
	155	187	236	149	449	1,890

**Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$1,060	\$1,182	\$1,354	\$986	\$1,102	\$915
	<i>35</i>	<i>140</i>	<i>104</i>	<i>62</i>	<i>79</i>	<i>101</i>
<b>Metropolitan Area Resident</b>						
Yes	1,093	1,413	1,436	1,049	1,095	982
	<i>45</i>	<i>212</i>	<i>145</i>	<i>87</i>	<i>86</i>	<i>145</i>
No	973	796	1,197	890	1,096	774
	<i>52</i>	<i>73</i>	<i>151</i>	<i>80</i>	<i>167</i>	<i>69</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B, for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,109	\$1,424	\$2,539	\$2,165	\$2,091	\$2,122
	37	78	131	82	72	154
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	1,826	1,042	2,570	1,885	1,753	1,965
	55	93	255	104	101	236
75 - 84 years	2,340	1,788	2,253	2,481	2,370	2,144
	73	248	171	176	106	166
85 years and older	2,331	2,101	2,365	2,158	2,323	3,050
	91	368	203	133	172	530
<b>Disabled</b>						
Under 45 years	2,597	1,577	2,958	1,506	2,799	0
	362	268	605	469	447	0
45 - 64 years	2,595	1,607	2,561	3,251	3,354	2,513
	226	186	281	564	626	987
<b>Gender</b>						
Male	2,202	1,424	2,518	2,453	2,243	2,043
	64	99	193	181	114	291
Female	2,038	1,423	2,551	1,986	1,952	2,182
	46	118	167	75	95	158
<b>Living Arrangement</b>						
Alone	2,093	1,319	2,388	1,934	2,307	2,185
	79	128	141	107	198	257
With spouse	2,020	1,296	3,007	2,266	1,898	2,017
	52	99	447	132	74	191
With children	2,517	1,633	2,726	2,185	2,890	3,069
	143	329	290	181	344	1,114
With others	2,365	1,955	2,174	2,663	2,922	2,562
	180	309	245	278	847	682

**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,109	\$1,424	\$2,539	\$2,165	\$2,091	\$2,122
	37	78	131	82	72	154
<b>Race/Ethnicity</b>						
White non-Hispanic	2,082	1,367	2,822	2,172	2,001	2,121
	42	100	207	89	69	158
Black non-Hispanic	2,374	1,676	2,259	1,856	3,527	2,661
	187	178	241	283	766	883
Hispanic	2,133	1,289	2,165	2,264	2,338	1,459
	120	207	230	419	352	617
Other	2,165	1,705	2,386	2,216	2,006	1,506
	215	791	379	410	573	772
<b>Income</b>						
Less than \$2,500	2,596	1,633	2,221	2,244	3,353	1,816
	378	598	787	481	1,177	604
\$2,500 - \$4,999	2,144	688	3,141	1,573	1,170	1,182
	353	224	746	365	309	116
\$5,000 - \$7,499	1,985	1,336	2,116	2,081	1,519	2,022
	103	250	128	310	290	890
\$7,500 - \$9,999	2,223	1,553	2,808	1,850	2,353	2,651
	136	167	218	152	618	1,469
\$10,000 - \$14,999	2,188	1,708	2,583	2,365	2,146	2,226
	120	176	263	322	152	344
\$15,000 - \$19,999	2,161	1,388	5,781	2,090	2,264	1,833
	135	176	2,958	167	259	308
\$20,000 - \$24,999	2,201	1,387	4,125	2,141	2,377	2,317
	119	297	1,498	186	223	369
\$25,000 - \$29,999	1,882	761	1,798	2,228	1,653	2,143
	100	213	793	220	153	316
\$30,000 or more	2,023	968	2,323	2,223	1,984	2,127
	65	150	719	164	103	288



**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,109	\$1,424	\$2,539	\$2,165	\$2,091	\$2,122
	37	78	131	82	72	154
<b>Health Status</b>						
Excellent	1,249	831	1,381	1,209	1,055	1,380
	47	179	340	95	61	252
Very good	1,517	1,136	1,609	1,455	1,424	1,693
	45	146	196	86	79	166
Good	2,085	1,492	2,155	2,157	2,185	1,824
	61	135	152	115	123	211
Fair	2,681	1,411	2,521	3,068	3,072	3,603
	105	124	237	193	280	530
Poor	4,303	2,079	4,111	5,720	5,124	5,525
	284	286	488	950	649	1,949
<b>Functional Limitation</b>						
None	1,586	1,038	1,666	1,627	1,529	1,741
	34	97	101	68	55	195
IADL only <sup>4</sup>	2,402	1,527	2,173	2,817	2,517	2,533
	90	181	185	177	215	251
One to two ADLs <sup>5</sup>	2,705	1,851	2,791	2,628	3,147	3,172
	121	232	332	191	292	504
Three to five ADLs	4,516	2,431	5,233	4,508	5,247	3,633
	345	384	654	902	730	827

**Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$2,109	\$1,424	\$2,539	\$2,165	\$2,091	\$2,122
	<i>37</i>	<i>78</i>	<i>131</i>	<i>82</i>	<i>72</i>	<i>154</i>
<b>Metropolitan Area Resident</b>						
Yes	2,250	1,532	2,709	2,396	2,202	2,417
	<i>44</i>	<i>108</i>	<i>172</i>	<i>117</i>	<i>84</i>	<i>204</i>
No	1,713	1,223	2,168	1,761	1,684	1,393
	<i>51</i>	<i>86</i>	<i>212</i>	<i>90</i>	<i>115</i>	<i>160</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B, for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$769	\$594	\$929	\$682	\$855	\$851
	13	28	36	19	26	48
<b>Medicare Status<sup>3</sup></b>						
<b>Aged</b>						
65 - 74 years	703	510	836	673	775	812
	16	42	53	26	32	66
75 - 84 years	742	468	822	663	839	843
	17	38	46	27	39	70
85 years and older	717	595	781	687	727	799
	27	73	92	38	38	109
<b>Disabled</b>						
Under 45 years	1,016	687	1,075	992	1,333	0
	60	96	81	312	213	0
45 - 64 years	1,220	858	1,187	1,190	1,578	1,606
	77	84	129	190	207	473
<b>Gender</b>						
Male	731	580	839	672	825	796
	16	40	56	30	31	73
Female	797	612	978	689	882	890
	18	37	50	21	38	73
<b>Living Arrangement</b>						
Alone	778	579	994	668	860	821
	23	51	61	27	64	68
With spouse	762	583	909	674	871	841
	14	35	60	23	29	60
With children	760	692	814	752	707	837
	37	89	89	66	57	223
With others	791	577	922	765	775	1,150
	35	55	60	83	101	282

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$769	\$594	\$929	\$682	\$855	\$851
	13	28	36	19	26	48
<b>Race/Ethnicity</b>						
White non-Hispanic	780	609	1,120	676	852	870
	14	35	58	19	27	49
Black non-Hispanic	706	540	759	555	889	726
	42	49	62	67	145	220
Hispanic	745	677	690	818	1,024	450
	59	101	68	98	293	74
Other	677	353	678	1,162	612	495
	62	94	98	189	188	208
<b>Income</b>						
Less than \$2,500	731	474	639	808	703	1,643
	71	110	125	124	141	527
\$2,500 - \$4,999	695	374	865	579	759	631
	63	101	104	113	139	188
\$5,000 - \$7,499	785	523	916	594	729	396
	34	58	53	52	102	109
\$7,500 - \$9,999	787	516	1,070	670	789	910
	37	56	85	53	81	375
\$10,000 - \$14,999	736	648	811	709	822	858
	27	59	71	44	62	142
\$15,000 - \$19,999	740	605	1,071	695	815	760
	26	67	263	51	55	88
\$20,000 - \$24,999	816	687	555	687	969	934
	36	91	247	48	77	153
\$25,000 - \$29,999	757	598	580	727	814	945
	42	113	169	65	73	208
\$30,000 or more	784	739	914	662	878	838
	21	172	232	32	37	81

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$769	\$594	\$929	\$682	\$855	\$851
	13	28	36	19	26	48
<b>Health Status</b>						
Excellent	470	354	474	372	533	573
	18	65	67	25	35	77
Very good	595	397	822	541	648	626
	17	42	149	28	28	60
Good	748	582	741	712	848	894
	17	45	41	33	36	98
Fair	1,027	722	1,041	926	1,243	1,398
	27	57	53	43	87	122
Poor	1,252	800	1,242	1,194	1,565	1,440
	57	81	98	79	171	236
<b>Functional Limitation</b>						
None	611	476	717	552	676	725
	12	33	41	21	22	53
IADL only <sup>4</sup>	903	647	937	819	1,068	997
	28	57	67	45	63	106
One to two ADLs <sup>5</sup>	986	693	1,052	993	1,075	1,258
	37	67	107	52	73	190
Three to five ADLs	1,193	908	1,272	854	1,627	1,042
	81	130	95	62	254	187

**Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total <sup>2</sup>	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
<b>Expenditures per User</b>	\$769	\$594	\$929	\$682	\$855	\$851
	<i>13</i>	<i>28</i>	<i>36</i>	<i>19</i>	<i>26</i>	<i>48</i>
<b>Metropolitan Area Resident</b>						
Yes	774	636	906	690	863	880
	<i>15</i>	<i>36</i>	<i>46</i>	<i>25</i>	<i>30</i>	<i>59</i>
No	753	517	982	669	823	780
	<i>22</i>	<i>38</i>	<i>54</i>	<i>29</i>	<i>48</i>	<i>88</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B, for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

	Source of Payment					
Beneficiary Characteristic	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$12,102	\$10,432	\$139	\$1,030	\$310	\$192
	434	389	23	152	46	48
Medicare Status <sup>2</sup>						
Aged						
65 - 74 years	12,285	10,892	105	798	240	249
	976	957	16	91	45	103
75 - 84 years	11,203	10,031	63	673	328	108
	401	379	8	44	88	37
85 years and older	9,483	8,432	112	758	131	50
	461	419	24	141	24	21
Disabled						
Under 45 years	15,377	13,278	894	724	407	74
	2,110	2,105	475	256	96	50
45 - 64 years	16,652	11,300	279	3,851	737	485
	1,757	1,247	45	1,481	366	183
Gender						
Male	13,433	11,356	139	1,158	418	362
	837	761	47	255	86	99
Female	10,921	9,610	139	917	214	40
	349	302	11	145	53	21
Marital Status						
Married	12,382	10,531	51	1,254	341	205
	651	588	10	247	83	58
Widowed	11,626	10,311	134	741	255	185
	813	804	15	78	51	107
Divorced/separated	12,045	9,754	287	1,345	405	254
	1,192	862	41	820	92	78
Never married	12,872	11,495	782	354	231	10
	1,375	1,282	363	93	49	11

**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$12,102	\$10,432	\$139	\$1,030	\$310	\$192
	434	389	23	152	46	48
<b>Race/Ethnicity</b>						
White non-Hispanic	11,914	10,226	80	1,165	292	151
	475	417	8	188	54	35
Black non-Hispanic	13,601	12,117	510	382	453	138
	1,141	1,102	207	86	86	53
Hispanic	11,066	9,169	327	238	426	906
	1,509	1,312	51	63	221	644
Other	15,919	14,593	217	959	80	70
	2,995	3,103	81	613	32	51
<b>Income</b>						
Less than \$2,500	8,445	7,227	131	314	582	191
	1,214	1,204	43	71	385	117
\$2,500 - \$4,999	13,542	11,834	1,365	218	105	21
	2,401	2,422	873	54	44	14
\$5,000 - \$7,499	13,508	12,353	462	332	343	17
	1,760	1,757	34	67	84	8
\$7,500 - \$9,999	12,608	10,800	249	1,218	229	113
	1,103	900	38	532	48	81
\$10,000 - \$14,999	11,406	9,959	59	683	379	325
	695	627	14	106	80	192
\$15,000 - \$19,999	11,929	9,850	22	1,697	201	159
	1,125	745	14	872	63	51
\$20,000 - \$24,999	14,392	12,680	10	928	447	327
	1,912	1,836	6	157	294	136
\$25,000 - \$29,999	10,445	8,111	8	1,406	687	234
	982	763	5	534	358	155
\$30,000 or more	11,114	9,433	1	1,370	139	171
	732	634	1	234	30	106



**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

	Source of Payment					
Beneficiary Characteristic	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$12,102	\$10,432	\$139	\$1,030	\$310	\$192
	434	389	23	152	46	48
Health Status						
Excellent	8,012	7,251	52	512	146	51
	651	638	13	52	58	34
Very good	8,932	7,621	44	886	135	246
	476	457	9	123	25	99
Good	11,373	10,154	81	733	284	120
	658	634	10	79	94	48
Fair	12,129	10,363	225	830	400	310
	627	580	73	123	137	151
Poor	17,716	14,804	232	2,093	444	143
	1,852	1,774	33	709	93	49
Functional Limitation						
None	10,383	8,914	120	955	182	212
	498	443	49	130	27	53
IADL only <sup>3</sup>	12,337	10,391	124	1,248	371	202
	773	563	16	430	113	131
One to two ADLs <sup>4</sup>	11,497	10,321	147	571	388	71
	792	794	21	76	194	28
Three to five ADLs	16,692	14,437	209	1,357	428	262
	1,880	1,877	29	379	110	121

**Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Inpatient Hospital Stay in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$12,102	\$10,432	\$139	\$1,030	\$310	\$192
	<i>434</i>	<i>389</i>	<i>23</i>	<i>152</i>	<i>46</i>	<i>48</i>
<b>Metropolitan Area Resident</b>						
Yes	12,196	10,615	143	913	335	191
	<i>528</i>	<i>497</i>	<i>30</i>	<i>114</i>	<i>60</i>	<i>57</i>
No	11,854	9,928	129	1,361	240	195
	<i>787</i>	<i>584</i>	<i>15</i>	<i>470</i>	<i>45</i>	<i>87</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$1,060	\$640	\$32	\$252	\$105	\$30
	35	25	3	12	6	4
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	940	542	19	252	97	32
	52	33	3	19	8	5
75 - 84 years	933	563	18	247	89	16
	46	28	3	16	12	5
85 years and older	751	473	20	184	64	11
	83	60	4	21	10	5
<b>Disabled</b>						
Under 45 years	2,073	1,333	191	261	238	50
	333	266	42	102	60	13
45 - 64 years	2,050	1,333	102	338	193	85
	272	215	17	64	28	25
<b>Gender</b>						
Male	1,179	686	26	292	119	55
	51	37	3	19	9	8
Female	971	605	37	222	95	11
	44	30	4	16	8	4
<b>Marital Status</b>						
Married	1,072	617	17	303	100	35
	53	37	4	19	8	6
Widowed	917	567	30	202	105	14
	42	28	4	12	11	5
Divorced/separated	1,495	989	86	221	147	52
	191	151	13	47	27	11
Never married	1,061	713	98	112	93	45
	141	115	17	17	16	19

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$1,060	\$640	\$32	\$252	\$105	\$30
	35	25	3	12	6	4
<b>Race/Ethnicity</b>						
White non-Hispanic	930	528	17	268	94	23
	32	19	2	14	6	4
Black non-Hispanic	1,919	1,357	92	208	193	69
	234	178	11	47	31	19
Hispanic	1,385	964	118	125	108	70
	247	189	20	34	29	28
Other	1,708	1,171	141	177	162	57
	455	387	54	62	55	32
<b>Income</b>						
Less than \$2,500	1,742	1,120	32	317	171	102
	547	372	13	130	43	56
\$2,500 - \$4,999	1,065	651	159	106	60	90
	171	114	24	33	14	69
\$5,000 - \$7,499	1,011	704	127	58	110	12
	88	66	12	10	22	4
\$7,500 - \$9,999	1,149	741	69	166	133	40
	100	79	10	37	22	11
\$10,000 - \$14,999	1,133	739	19	228	119	27
	116	90	6	25	14	7
\$15,000 - \$19,999	1,218	706	18	344	132	18
	129	79	11	51	24	5
\$20,000 - \$24,999	1,024	557	1	321	112	33
	91	57	0	34	19	10
\$25,000 - \$29,999	938	550	1	296	72	20
	110	76	1	39	15	15
\$30,000 or more	907	486	0	315	72	35
	48	32	0	24	5	9

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$1,060	\$640	\$32	\$252	\$105	\$30
	35	25	3	12	6	4
Health Status						
Excellent	751	422	5	225	77	22
	101	53	1	40	15	10
Very good	663	397	11	187	58	10
	35	23	2	15	6	3
Good	940	553	24	241	101	21
	46	29	3	20	12	4
Fair	1,489	945	45	299	134	66
	131	103	7	31	15	14
Poor	1,945	1,180	115	391	209	50
	177	127	22	55	33	17
Functional Limitation						
None	822	482	16	222	84	18
	41	27	2	16	7	3
IADL only <sup>3</sup>	1,370	866	41	308	113	43
	97	73	6	25	12	11
One to two ADLs <sup>4</sup>	1,302	792	55	253	150	52
	117	87	8	34	22	15
Three to five ADLs	1,370	799	79	300	148	44
	155	105	22	54	24	18

**Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Outpatient Hospital Visit in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
<b>Expenditures per User</b>	\$1,060	\$640	\$32	\$252	\$105	\$30
	<i>35</i>	<i>25</i>	<i>3</i>	<i>12</i>	<i>6</i>	<i>4</i>
<b>Metropolitan Area Resident</b>						
Yes	1,093	662	31	263	108	29
	<i>45</i>	<i>32</i>	<i>3</i>	<i>15</i>	<i>8</i>	<i>4</i>
No	973	584	34	226	94	34
	<i>52</i>	<i>39</i>	<i>6</i>	<i>17</i>	<i>8</i>	<i>8</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$2,109	\$1,341	\$56	\$318	\$372	\$23
	37	21	10	13	15	4
Medicare Status <sup>2</sup>						
Aged						
65 - 74 years	1,826	1,186	30	288	303	20
	55	37	4	15	14	6
75 - 84 years	2,340	1,545	28	343	409	15
	73	40	3	17	38	2
85 years and older	2,331	1,533	46	274	464	13
	91	54	6	13	46	5
Disabled						
Under 45 years	2,597	1,260	521	279	467	70
	362	164	271	63	68	20
45 - 64 years	2,595	1,381	134	475	541	64
	226	100	26	115	116	21
Gender						
Male	2,202	1,397	39	345	383	38
	64	36	5	17	33	8
Female	2,038	1,297	70	296	364	11
	46	24	18	20	17	2
Marital Status						
Married	2,016	1,269	34	348	346	18
	52	31	18	13	21	2
Widowed	2,225	1,461	56	289	403	17
	61	38	7	18	26	4
Divorced/separated	2,379	1,431	137	305	435	72
	205	82	26	111	112	38
Never married	2,007	1,258	149	203	367	29
	147	110	23	31	43	9

**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$2,109	\$1,341	\$56	\$318	\$372	\$23
	37	21	10	13	15	4
<b>Race/Ethnicity</b>						
White non-Hispanic	2,082	1,310	43	346	366	19
	42	23	12	15	14	2
Black non-Hispanic	2,374	1,519	137	210	443	66
	187	99	19	32	114	35
Hispanic	2,133	1,510	109	136	360	18
	120	90	13	18	69	4
Other	2,165	1,471	112	179	381	23
	215	149	24	33	103	10
<b>Income</b>						
Less than \$2,500	2,596	1,616	110	252	557	61
	378	241	84	71	151	47
\$2,500 - \$4,999	2,144	1,469	194	155	289	38
	353	285	49	62	49	19
\$5,000 - \$7,499	1,985	1,360	194	98	316	16
	103	69	14	14	46	4
\$7,500 - \$9,999	2,223	1,412	117	264	386	43
	136	70	14	83	37	15
\$10,000 - \$14,999	2,188	1,423	28	273	443	21
	120	60	4	17	63	4
\$15,000 - \$19,999	2,161	1,321	79	331	413	16
	135	59	73	25	69	4
\$20,000 - \$24,999	2,201	1,405	2	400	355	37
	119	75	1	27	34	25
\$25,000 - \$29,999	1,882	1,223	3	364	284	9
	100	68	2	38	14	3
\$30,000 or more	2,023	1,230	1	430	348	15
	65	43	0	27	17	4



**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$2,109	\$1,341	\$56	\$318	\$372	\$23
	37	21	10	13	15	4
Health Status						
Excellent	1,249	798	9	194	239	10
	47	34	1	13	18	4
Very good	1,517	970	12	257	266	12
	45	29	2	21	14	4
Good	2,085	1,354	45	300	365	21
	61	41	5	15	23	3
Fair	2,681	1,707	85	372	473	43
	105	66	11	21	57	16
Poor	4,303	2,614	249	659	737	43
	284	144	108	109	115	12
Functional Limitation						
None	1,586	1,032	17	263	256	17
	34	23	2	12	10	5
IADL only <sup>3</sup>	2,402	1,580	52	344	393	32
	90	53	6	22	44	8
One to two ADLs <sup>4</sup>	2,705	1,730	92	363	495	24
	121	87	14	30	38	5
Three to five ADLs	4,516	2,484	328	610	1,054	40
	345	156	143	134	139	11

**Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Physician/Supplier Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$2,109	\$1,341	\$56	\$318	\$372	\$23
	<i>37</i>	<i>21</i>	<i>10</i>	<i>13</i>	<i>15</i>	<i>4</i>
<b>Metropolitan Area Resident</b>						
Yes	2,250	1,452	60	333	384	22
	<i>44</i>	<i>24</i>	<i>14</i>	<i>16</i>	<i>19</i>	<i>3</i>
No	1,713	1,029	46	276	337	26
	<i>51</i>	<i>36</i>	<i>6</i>	<i>18</i>	<i>20</i>	<i>10</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Dental Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$486	\$2	\$7	\$70	\$398	\$9
	17	0	1	5	17	2
<b>Medicare Status<sup>2</sup></b>						
<b>Aged</b>						
65 - 74 years	477	2	4	83	379	9
	24	0	1	7	21	3
75 - 84 years	529	4	3	57	459	6
	34	1	1	8	32	2
85 years and older	434	2	0	36	389	6
	41	0	0	11	39	3
<b>Disabled</b>						
Under 45 years	392	0	39	35	301	17
	94	0	9	8	93	7
45 - 64 years	455	1	35	70	332	17
	80	0	9	15	75	6
<b>Gender</b>						
Male	552	3	6	85	444	14
	30	1	2	9	29	4
Female	437	2	7	59	364	5
	19	0	1	5	18	2
<b>Marital Status</b>						
Married	507	3	4	85	404	11
	23	1	1	7	22	3
Widowed	465	2	4	49	407	3
	29	0	2	6	27	1
Divorced/separated	488	2	30	37	408	12
	79	0	9	10	78	5
Never married	371	1	16	53	297	4
	41	0	3	13	35	2

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Dental Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$486	\$2	\$7	\$70	\$398	\$9
	17	0	1	5	17	2
<b>Race/Ethnicity</b>						
White non-Hispanic	492	2	3	70	409	8
	18	0	1	5	18	2
Black non-Hispanic	439	2	24	98	299	16
	53	0	10	30	42	9
Hispanic	453	4	44	54	340	11
	64	1	16	12	64	3
Other	414	3	40	86	272	13
	82	1	17	44	58	9
<b>Income</b>						
Less than \$2,500	506	21	13	37	421	15
	134	20	6	16	114	9
\$2,500 - \$4,999	348	1	20	49	264	13
	94	1	13	18	94	6
\$5,000 - \$7,499	443	2	50	9	372	10
	105	0	13	3	106	4
\$7,500 - \$9,999	360	2	24	15	312	6
	69	0	8	5	68	4
\$10,000 - \$14,999	416	4	10	31	365	6
	48	2	4	7	44	3
\$15,000 - \$19,999	427	3	3	66	353	2
	47	0	2	14	41	1
\$20,000 - \$24,999	432	2	0	86	330	15
	32	0	0	14	25	5
\$25,000 - \$29,999	364	2	0	54	306	3
	32	0	0	13	25	2
\$30,000 or more	605	2	0	104	488	11
	28	0	0	9	27	4

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Dental Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$486	\$2	\$7	\$70	\$398	\$9
	17	0	1	5	17	2
<b>Health Status</b>						
Excellent	482	3	3	68	406	2
	27	1	1	9	25	1
Very good	461	3	3	65	388	2
	29	1	2	7	28	1
Good	534	2	6	76	434	15
	35	0	2	8	33	6
Fair	477	2	16	73	366	19
	45	0	4	15	43	7
Poor	417	1	23	68	316	9
	56	0	7	20	44	4
<b>Functional Limitation</b>						
None	473	2	5	71	386	8
	21	0	1	7	20	2
IADL only <sup>3</sup>	475	2	9	67	390	8
	34	0	2	7	30	2
One to two ADLs <sup>4</sup>	596	4	9	69	500	14
	67	2	3	16	61	7
Three to five ADLs	481	2	18	69	379	13
	68	0	10	22	53	8

**Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Dental Service in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$486	\$2	\$7	\$70	\$398	\$9
	<i>17</i>	<i>0</i>	<i>1</i>	<i>5</i>	<i>17</i>	<i>2</i>
<b>Metropolitan Area Resident</b>						
Yes	517	3	7	76	421	9
	<i>21</i>	<i>0</i>	<i>1</i>	<i>6</i>	<i>19</i>	<i>2</i>
No	389	0	5	52	325	7
	<i>36</i>	<i>0</i>	<i>1</i>	<i>8</i>	<i>37</i>	<i>2</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (1 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

	Source of Payment					
Beneficiary Characteristic	Total	Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$769	\$27	\$86	\$251	\$350	\$54
	13	1	5	9	6	3
Medicare Status <sup>2</sup>						
Aged						
65 - 74 years	703	27	52	261	322	41
	16	2	5	12	8	4
75 - 84 years	742	30	55	233	369	55
	17	2	5	12	10	6
85 years and older	717	30	71	171	395	48
	27	3	10	14	17	8
Disabled						
Under 45 years	1,016	7	461	177	284	87
	60	4	42	31	29	19
45 - 64 years	1,220	15	260	378	440	126
	77	4	35	57	28	18
Gender						
Male	731	28	66	246	324	67
	16	2	7	11	10	5
Female	797	26	101	256	370	45
	18	1	7	12	7	4
Marital Status						
Married	760	27	30	306	351	46
	14	2	3	11	8	3
Widowed	747	28	96	193	370	61
	17	2	10	11	10	8
Divorced/separated	810	25	240	161	303	82
	40	3	29	20	18	13
Never married	906	17	330	183	311	65
	75	2	36	48	24	15

**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (2 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$769	\$27	\$86	\$251	\$350	\$54
	13	1	5	9	6	3
<b>Race/Ethnicity</b>						
White non-Hispanic	780	25	65	272	366	53
	14	1	4	10	7	4
Black non-Hispanic	706	26	186	153	285	56
	42	3	18	27	20	8
Hispanic	745	45	206	155	279	59
	59	5	29	47	17	16
Other	677	39	138	146	248	105
	62	7	30	35	35	33
<b>Income</b>						
Less than \$2,500	731	48	87	189	309	98
	71	15	24	43	30	27
\$2,500 - \$4,999	695	16	275	83	276	45
	63	4	51	23	28	13
\$5,000 - \$7,499	785	17	407	67	236	58
	34	2	27	11	12	9
\$7,500 - \$9,999	787	27	205	109	369	77
	37	2	24	12	20	8
\$10,000 - \$14,999	736	28	40	200	391	76
	27	2	6	18	16	15
\$15,000 - \$19,999	740	28	14	262	381	54
	26	3	4	20	16	8
\$20,000 - \$24,999	816	26	1	340	388	61
	36	4	0	30	19	9
\$25,000 - \$29,999	757	27	2	338	361	28
	42	4	2	33	23	10
\$30,000 or more	784	28	2	385	339	30
	21	2	1	16	11	5



**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (3 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$769	\$27	\$86	\$251	\$350	\$54
	13	1	5	9	6	3
<b>Health Status</b>						
Excellent	470	31	17	188	205	29
	18	3	3	14	9	6
Very good	595	28	34	214	288	31
	17	2	6	10	9	5
Good	748	30	66	250	352	50
	17	2	5	11	10	6
Fair	1,027	19	162	299	453	95
	27	2	13	23	13	10
Poor	1,252	21	251	359	527	94
	57	4	31	49	24	15
<b>Functional Limitation</b>						
None	611	27	41	216	290	37
	12	1	3	8	7	3
IADL only <sup>3</sup>	903	31	121	288	396	68
	28	3	13	18	13	8
One to two ADLs <sup>4</sup>	986	21	150	282	442	91
	37	2	19	23	18	12
Three to five ADLs	1,193	21	216	356	518	82
	81	3	24	65	30	17

**Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries Per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1996 (4 of 4)**

Community-Only Residents with at Least One Prescribed Medicine in 1996<sup>1</sup>

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
<b>Expenditures per User</b>	\$769	\$27	\$86	\$251	\$350	\$54
	<i>13</i>	<i>1</i>	<i>5</i>	<i>9</i>	<i>6</i>	<i>3</i>
<b>Metropolitan Area Resident</b>						
Yes	774	35	77	273	328	62
	<i>15</i>	<i>1</i>	<i>5</i>	<i>11</i>	<i>7</i>	<i>4</i>
No	753	4	112	190	411	35
	<i>22</i>	<i>2</i>	<i>10</i>	<i>13</i>	<i>13</i>	<i>3</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File.

Note: Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.